

CS 1/21/03



**HAWAII STATE ETHICS COMMISSION**  
 1001 BISHOP STREET, ASB TOWER 970  
 P.O. BOX 616, HONOLULU, HAWAII 96809  
 TEL: 587-0460 FAX: 587-0470  
 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII  
 STATE ETHICS COMMISSION

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 HLPAC

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
TOLENTINO	MICHELLE	T.	(808) 841-5877
MAILING ADDRESS (Street)			FAX
1617 PALAMA STREET			(808) 847-7829
(City)	(State)	(Zip Code)	
HONOLULU	HI	96817	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)			(State)
(Zip Code)			

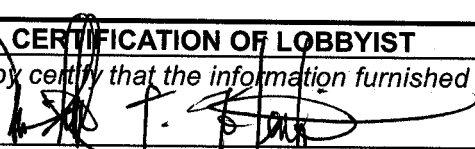
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
HAWAII LABORERS' PAC			(808) 841-5877
MAILING ADDRESS (Street)			FAX
1617 PALAMA STREET			(808) 847-7829
(City)	(State)	(Zip Code)	
HONOLULU	HI	96817	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
NORMAN JANIKI, JR.			(808) 845-3238
MAILING ADDRESS (Street)			FAX
1617 PALAMA STREET			(808) 847-7829
(City)	(State)	(Zip Code)	
HONOLULU	HI	96817	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

  
(Signature of Lobbyist)

1-9-03  
(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
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BENJAMIN SAGUIBO

BUSINESS MANAGER/SECRETARY-TREASURER

NAME OF ORGANIZATION (if applicable)

HAWAII LABORERS' PAC

TELEPHONE

(808) 841-5877

MAILING ADDRESS (Street)

1617 PALAMA STREET

FAX

(808) 847-7829

(City)

HONOLULU

(State)

HI

(Zip Code)

96817

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

  
(Signature of Authorizing Officer or Person Represented)

9 January 2003  
(Date)